

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

| REQUEST FOR PATENT FEE REFUND  |                                   |   |              |           |           |  |  |  |  |  |  |  |  |
|--|-----------------------------------|---|--------------|-----------|-----------|--|--|--|--|--|--|--|--|
| 1 Date of Request: <u>06/25/05</u>   |                                   | 2 Serial/Patent # <u>10/522854</u>  |              |           |           |  |  |  |  |  |  |  |  |
| 3 Please refund the following fee(s):  |                                   | 4 PAPER NUMBER  | 5 DATE FILED |           | 6 AMOUNT  |  |  |  |  |  |  |  |  |
|  | Filing                            |   |              |           | \$        |  |  |  |  |  |  |  |  |
|  | Amendment                         |   |              |           | \$        |  |  |  |  |  |  |  |  |
|  | Extension of Time                 |   |              |           | \$        |  |  |  |  |  |  |  |  |
|  | Notice of Appeal/Appeal           |   |              |           | \$        |  |  |  |  |  |  |  |  |
|  | Petition                          |   |              |           | \$        |  |  |  |  |  |  |  |  |
|  | Issue                             |   |              |           | \$        |  |  |  |  |  |  |  |  |
|  | Cert of Correction/Terminal Disc. |   |              |           | \$        |  |  |  |  |  |  |  |  |
|  | Maintenance                       |   |              |           | \$        |  |  |  |  |  |  |  |  |
|  | Assignment                        |   |              |           | \$        |  |  |  |  |  |  |  |  |
| ✓  | Other <u>CC Refund</u>            |   |              |           | \$ 100.00 |  |  |  |  |  |  |  |  |
|  |                                   | 7 TOTAL AMOUNT OF REFUND  |              | \$ 100.00 |           |  |  |  |  |  |  |  |  |
|  |                                   | 8 TO BE REFUNDED BY:  |              |           |           |  |  |  |  |  |  |  |  |
|  |                                   | Treasury Check  |              |           |           |  |  |  |  |  |  |  |  |
|  |                                   | Credit Deposit A/C #:   |              |           |           |  |  |  |  |  |  |  |  |
|  |                                   | 9 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> |              |           |           |  |  |  |  |  |  |  |  |
|  |                                   |   |              |           |           |  |  |  |  |  |  |  |  |
| 10 REASON:   |                                   |   |              |           |           |  |  |  |  |  |  |  |  |
|  | Overpayment                       |   |              |           |           |  |  |  |  |  |  |  |  |
|  | Duplicate Payment                 |   |              |           |           |  |  |  |  |  |  |  |  |
|  | No Fee Due (Explanation):         |   |              |           |           |  |  |  |  |  |  |  |  |
| <u>Fee Code Correction</u>   |                                   |   |              |           |           |  |  |  |  |  |  |  |  |
| <u>CC Refund</u>   |                                   |   |              |           |           |  |  |  |  |  |  |  |  |
|  |                                   |   |              |           |           |  |  |  |  |  |  |  |  |
| 11 REFUND REQUESTED BY:  |                                   |   |              |           |           |  |  |  |  |  |  |  |  |
| TYPED/PRINTED NAME: <u>Barbara A. Campbell</u> TITLE: <u>Paralegal</u>   |                                   |   |              |           |           |  |  |  |  |  |  |  |  |
| SIGNATURE: <u>[Signature]</u>  |                                   |   |              |           |           |  |  |  |  |  |  |  |  |
| OFFICE: <u>PCT/DO/EO</u>   |                                   |   |              |           |           |  |  |  |  |  |  |  |  |
| <div style="float: right; font-size: small;"> Adjusted: 06/27/2005 BCAMPREI<br/> 02707/2005 MKATPAGH 00000014 10522854<br/> 02 FC:1632 -500.00 OP </div> |                                   |   |              |           |           |  |  |  |  |  |  |  |  |
| ***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****  |                                   |   |              |           |           |  |  |  |  |  |  |  |  |
| APPROVED: _____ DATE: _____  |                                   |   |              |           |           |  |  |  |  |  |  |  |  |

*Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:*

UNITED STATES NATIONAL STAGE WORKSHEET (DO/EO)

BAC, Paralegal

Publication No. WO 04 / 013154 Publication Date 02-12-04

Basic fee paid: \$ 300 ISA fee paid: \$ 400 IPER fee paid: \$ 200

U. S. Application No. 10/522854

International Application Number: PCT/EP03 / 08447 International Filing Date: 07-30-03

Application Filed by 30 Month: ☒ Yes ☐ No Language: ENGLISH

Copy in International Application: yes ☒ no ☐ Translation: yes ☐ no ☐ Defective: ☐ Yes

371 Filing Fees ☒ paid ☐ Insufficient Meet Article 33 Requirement: ☐ Yes ☐ No & why not \_\_\_\_\_

Original claims: 1-17 Added Claims: 15-23 Total Claims: 22 Chargeable 22 Independent 4 multiple N

Claims Cancelled via Article 34 & /or Pre-Amdt 15-17 13 Claims added via Article 34 \_\_\_\_\_

Total Number of Drawing Sheets: 0 Foreign Text: \_\_\_\_\_

Oath/Declaration: yes ☒ no ☐ : signed ☒ unsigned ☐ defective ☐ Date Satisfied: **Rec'd PCT/PTO 08 NOV 2005**

PCT/RO/101/Request Form Declaration: ☐ yes: ☐ signed ☐ Unsigned

Small Entity: ☐ Yes Small Entity Statement ☐ Assertion by filing fee paid ☐ Large Entity: ☒

1<sup>st</sup> Submission: Biochemical Seq. Diskette: yes ☐ no ☐ entered & date \_\_\_\_\_ not entered & date \_\_\_\_\_

2<sup>nd</sup> Submission: Biochemical Seq. Diskette: yes ☐ no ☐ entered & date \_\_\_\_\_ not entered & date \_\_\_\_\_

Biochemical Seq. Listing: yes ☐ no ☐ statement ☐ yes ☐ no other submission date(s): \_\_\_\_\_

Biochemical Diskette/Listing not needed: # 7 dated 11-08-05

Copy of ISR: ☐ with references ☐ without references ☒ Non-Establishment of ISR PCT/ISA/203 \_\_\_\_\_

Article 19 Amendment: ☐ entered ☐ not entered ☐ Replaced by Article 34 Amendment \_\_\_\_\_

Copy of IPER: ☐ without Annexes: ☒ with Annexes: ☒ Annexes entered ☐ Annexes not entered

Reason Annexes have not been entered: \_\_\_\_\_

Preliminary Amendment(s): yes ☒ not entered ☐ & Why \_\_\_\_\_ Other Amendment dates: \_\_\_\_\_

IDS: ☐ yes ☐ with references ☐ without references Other IDS Dates: \_\_\_\_\_

Request for Immediate Examination: yes ☒ no ☐ , Other Early Processing Date: \_\_\_\_\_

Substitute Specification: yes ☐ no ☐

Assignment: yes ☒ no ☐ Date filed: 11-13-05 Assignment for PG Pub: ☐ Yes ☐ No Date filed: \_\_\_\_\_

Power of Attorney ☒ Application Data Sheet ☐ Priority Document(s): yes ☒

Application Fees: owed ☒ paid ☐

☒ Declaration ☐ Claims ☐ Multiple ☐ Translation ☐ Extension ☐ Petition

Date of 35 USC Receipt of Request: **Rec'd PCT/PTO 31 JAN 2005**

Date Completion USC 371 Requirements: **Rec'd PCT/PTO 08 NOV 2005**

Notice of Missing Requirements: 6-25-05

371 Formalities Letter: (Sequence) 922 \_\_\_\_\_ or (Fees Owed) 923 \_\_\_\_\_

Notice of Defective Response: \_\_\_\_\_

Notice of Acceptance: 12-29-05

Notice of Abandonment: \_\_\_\_\_ Petition to Revive: \_\_\_\_\_ Petition 1.47: \_\_\_\_\_